

PART B - FEE(S) TRANSMITTAL

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7590

04/08/2009

RENNER, OTTO, BOISSELLE & SKLAR, LLP
 Nineteenth Floor
 1621 Euclid Avenue
 Cleveland, OH 44115-2191

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| |
|--------------------|
| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAME INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|---------------------|---------------------|------------------|
|-----------------|-------------|---------------------|---------------------|------------------|

10/815,226 03/30/2004

Andreas Raabe

SCHWP0186/USA

7171

TITLE OF INVENTION: PERSPECTIVE REGISTRATION AND VISUALIZATION OF INTERNAL AREAS OF THE BODY

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 07/08/2009 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| ROZANSKI, MICHAEL T | 3768 | 600-426000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Renner, Otto,
 2 Boisselle & Sklar,
 3 LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BrainLAB AG

Feldkirchen, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☒ Publication Fee (No small entity discount permitted)
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- ☐ A check is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Jason A. Worgull/

Date June 30, 2009

Typed or printed name Jason A. Worgull

Registration No. 48,044

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